

**Changes to the PIMS V. 5.3 User Manual, ADT Module, PTF Menu
as a result of Patches DG*5.3*510 and DG*5.3*511
September 2003**

DRG Calculation

The DRG Calculation option is used to compute and display the Diagnosis Related Group (DRG) for a patient based on that patient's diagnoses and any operations/procedures performed. This report utilizes the DRG weight and trim values published annually in the Federal Register for each Fiscal Year. These values are based on national Medicare data.

If you enter an INACTIVE diagnosis code, a message will be displayed and the prompt will be repeated.

You will initially be prompted for an effective date. This date will be used to validate diagnosis, operation/procedure, and DRG codes. You will also be prompted for the DXLS. Answer with the ICD Code Number of the diagnosis responsible for the major portion of the patient stay. Multiple secondary diagnoses and operations/procedures may also be entered.

The following is a list of those items that are computed and displayed for the DRG.

Weight - The value assigned to the DRG.

Low day(s) - The low trim point day for the assigned DRG (always 1 day).

High days - The high trim point day for the assigned DRG.

Avg len of stay - The geometric national average length of stay for the DRG.

The data may be calculated for VA or non-VA patients. The system does not store the DRG compiled for each patient. It is recalculated each time this option is utilized.

PTF Output Menu

DRG Information Report

The DRG Information Report option is used to generate a report displaying the Diagnosis Related Group (DRG) for a patient based on **an effective date entered by the user**, that patient's diagnoses and any operations/procedures performed. The DRG is calculated for each entered diagnosis code, determining what the DRG would be if each of the secondary diagnosis codes was treated as the DXLS (diagnosis responsible for major portion of patient's stay).

This report utilizes the DRG weight and trim values published annually in the Federal Register for each Fiscal Year. These values are based on national Medicare data.

The following is a list of those items that are computed and displayed for the DRG.

Effective Date - The effective date entered by the user.

Weight - The value assigned to the DRG.

Low day(s) - The low trim point day for the assigned DRG (always 1 day).

High days - The high trim point day for the assigned DRG.

Avg len of stay - The geometric national average length of stay for the DRG.

The data may be calculated for VA or non-VA patients. The system does not store the DRG compiled for each patient. It is recalculated each time this option is utilized.